

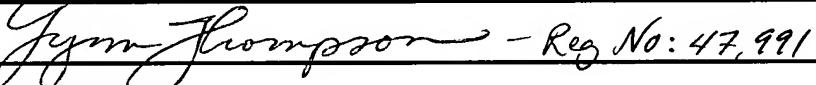


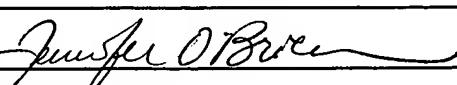
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PTO/SB/21 (09-04)

<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/635,807
		Filing Date	August 5, 2003
		First Named Inventor	RUBENSTEIN, EDWARD
		Art Unit	3762
		Examiner Name	BIANCO, PATRICIA
Total Number of Pages in This Submission		Attorney Docket Number	018050-000140US

ENCLOSURES (Check all that apply)				
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____  <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <input type="checkbox"/> Return Postcard		
<table border="1"> <tr> <td>Remarks</td> <td>The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.</td> </tr> </table>			Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.
Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.			

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Townsend and Townsend and Crew LLP		
Signature	 - Reg No: 47,991		
Printed name for	James M. Heslin		
Date	October 12, 2005	Reg. No.	29,541

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Signature			
Typed or printed name	Jennifer O'Brien	Date	October 12, 2005



**REQUEST FOR WITHDRAWAL  
AS ATTORNEY OR AGENT  
AND CHANGE OF  
CORRESPONDENCE ADDRESS**

Application Number	10/635,807
Filing Date	August 5, 2003
First Named Inventor	RUBENSTEIN, EDWARD
Art Unit	3762
Examiner Name	BIANCO, PATRICIA
Attorney Docket Number	018050-000140US

**To: Commissioner for Patents**  
**P.O. Box 1450**  
**Alexandria, VA 22313-1450**

Please withdraw me as attorney or agent for the above identified patent application, and

all the attorneys/agents of record  
 all the attorneys/agents (with registration numbers) listed on the attached paper(s), or  
 all the attorneys/agents associated with Customer Number 20350

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The reasons for this request are: Transfer to matter to

**CORRESPONDENCE ADDRESS**

- The correspondence address is NOT affected by this withdrawal.
- Change the correspondence address and direct all future correspondence to:

The address associated with Customer Number:

**OR**

<input checked="" type="checkbox"/> Firm or Individual Name	Eric Marzluf Caesar, Rivise, Bernstein, Cohen and Pokotilow, Ltd.		
Address	12th Floor, Seven Penn Center 1635 Market Street		
City	Philadelphia	State	PA Zip 19103-2212
Country	USA		
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Signature	<i>Jean Thompson</i> - Reg No: 47,991		
Name for	James M. Heslin	Registration No.	29,541
Date	October 12, 2005	Telephone No.	650-326-2400

*NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.*